



# ARIZONA CRIMINAL JUSTICE COMMISSION FINANCIAL REPORT

ACJC Grant Program: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Grant Number: \_\_\_\_\_ Report Period: \_\_\_\_\_

## PART I FINANCIAL DETAIL

Provide the following **DETAILED** budget information

*Please round to the nearest dollar.*

Category		This Period Expenses	This Period Encumbrances
1.	Salaries & Fringe Benefits	\$	\$
2.	Overtime	\$	\$
3.	Professional & Outside/ Consultant & Contractual Services	\$	\$
4.	In-State Travel	\$	\$
5.	Out-of-State Travel	\$	\$
6.	Confidential Expenses	\$	\$
6a.	Match for ACJC ( <i>Gang Prosecution Grant Program Only</i> )	\$	\$
7.	Operating Expenses	\$	\$
Equipment: (See Budget Category Guidelines for definitions)			
8.	Capital (List Below)	\$	\$
	Non-Capital (List Below)	\$	\$
9.	Total paid this period ( <b>Enter on Page 2, Line B</b> )	\$	
10.	Total Encumbrances this period ( <b>Enter on Page 2, Line D</b> )		\$
11.	Program Income spent this period***	\$	\$
12.	<b>SUBTOTAL</b>	\$ (Add lines 9+11)	\$ (Add lines 10+11)

*Please round all line items to the nearest dollar.*

Type of Equipment Purchased: <b>List Each Item Included Above</b> (Written Approval is Required)			
Non-Capital	Type of Equipment	Quantity	Amount Each (\$)
			\$
			\$
			\$
			\$

\*\*\*Refer to Part III Chapter 4: Program Income; OJP Financial Guide, for explanation of Program Income.

Agency Name: \_\_\_\_\_

Grant Number: \_\_\_\_\_

## PART II FINANCIAL SUMMARY

Provide information as requested below

*Please round to the nearest dollar.*

Line #	Status of Funds	Current Period
A	Total funds spent from prior report (Enter the number from Line C page 2 from your previous report)	\$
B	Total funds spent this period (Enter the number from Line 9 Page 1)	\$
C	Total funds spent to date (Add Lines A+B)	\$
D	Total encumbrances this period (Enter the number from Line 10 Page 1 )	\$
E	Total spent and encumbered to date (Add Line C+D)	\$
F	Total grant award (includes match, if any)	\$
G	Balance of grant (Line F-E)	\$
H	Interest earned this period**	\$
I	Program income received this period***	\$

*Please round to the nearest dollar.*

\*\*All interest, if earned, must be reported for all programs receiving federal monies. All interest must be reverted to the Arizona Criminal Justice Commission at the end of the grant period if applicable. The current version of the OJP Financial Guide is available at <http://www.ojp.usdoj.gov> to check if a vendor or contractor has a debarment or suspension as required in the Grant Agreement check the Excluded Parties Listing System web site at <http://epls.arnet.gov>

\*\*\*Refer to Part III Chapter 4: Program Income; OJP Financial Guide, for explanation of Program Income.

CERTIFICATION: I certify that to the best of my knowledge and belief, this report is correct and complete and that all outlays and unpaid obligations are for the purposes set forth in the grant award documents.

Prepared by: \_\_\_\_\_  
Typed Name Date Telephone Fax Number

Certified by: \_\_\_\_\_  
Signature of Authorized Official Date